

**ALIEN VERIFICATION ACKNOWLEDGMENT**

***Instructions: This form must be signed by any sole owner applicant who provides an alien verification document, which expires less than 12 months from the date the ABC license is issued.***

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**APPLICANT'S ACKNOWLEDGMENT**

As part of my application for an alcoholic beverage license, I gave the Department of Alcoholic Beverage Control (ABC) an alien verification document to establish my eligibility for State benefits (i.e., an ABC license). The document that I provided to ABC will expire on \_\_\_\_\_.

I understand the following:

- (1) If ABC approves my license application, it will issue an alcoholic beverage license to me that will expire on \_\_\_\_\_.
- (2) If I receive an ABC license, in order for me to continue to sell alcoholic beverages beyond \_\_\_\_\_, I must provide ABC with documentation, which supports legal presence beyond that date.
- (3) No later than \_\_\_\_\_, I must submit the following to ABC Headquarters:
  - (a) A completed Form ABC-69, *Statement of Citizenship, Alienage, and Immigration Status for State Public Benefits*; and
  - (b) A photocopy of both sides of one of the documents listed on the ABC-69, Section A or B extending my eligibility for state benefits beyond \_\_\_\_\_.

(Send items (a) and (b) to ABC Headquarters, Attention: Alien Verification Unit, 3810 Rosin Court, Suite 150, Sacramento, CA 95834.)

**(4) MY FAILURE TO PROVIDE ITEMS (a) AND (b) ABOVE WILL RESULT IN THE REVOCATION OF MY ABC LICENSE AND THE LOSS OF ALL ABC FEES I HAVE PAID.**

APPLICANT'S SIGNATURE	DATE SIGNED
APPLICANT'S PRINTED NAME	DAYTIME TELEPHONE NUMBER (      )
SIGNATURE OF PERSON ACTING FOR APPLICANT	DATE SIGNED
PRINTED NAME OF PERSON ACTING FOR APPLICANT	DAYTIME TELEPHONE NUMBER (      )